Madras City and 23 other towns of Tamil Nadu at a total cost of Rs. 89.13 crores for a period of 7 years w.e.f. 9th September, 1988 with a view to improving the health and family welfare status of the urban slum population. The Project was successful in improving the access and quality of service delivery by setting up well equipped health posts and referral facilities in urban areas. The Project succeded in bringing down the Infant Mortality Rate (IMR) to 22.7 per thousand live births in project area as compared to IMR rate of 43 among the overall urban slum population of the State.

Under the Reproductive and Child Health Programme which is also being funded by the World Bank the National components cover all the districts of the country. In addition, two sub-projects, one in Madurai (rural) and the other in Madurai (urban) are proposed to be taken up with IDA assistance during the 9th Plan period.

Central Funds for health Centres in the Scheduled Tribe Areas of Tamil Nadu

978. SHRI N. THALAVAI SUNDARAM: Will the PRIME MINISTER be pleased to state:

(a) whether Government had provided Central funds for the establishment of primary health centres, sub-centres and community health centres in Scheduled Tribe areas of Tamil Nadu;

(b) if so, the details thereof and the number of centres established district-wise and year-wise; and

(c) if so, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY): (a) The Community Health Centres and Primary Health Centres are established and maintained by the State Governments under the Minimum Needs Programme. During 1996-97, additional central assistance to the tune of Rs. 82.36 crore has been provided to the State of Tamil Nadu (including its tribal areas) under Basic Minimum Services under which Primary Health Care at Sub-centre level is identified as one of the Priority items.

(b) and (c) As per the information available, there are 2 Community Health Centres, 15 Primary Health Centres and III Sub-centres functioning in the tribal areas of Tamil Nadu. However, the Centre does not maintain the year-wise and district-wise details.

Printing the Names of Springs on Mineral Water Bottles

979. SHRI K.R. MALKANI: Will the PRIME MINISTER be pleased to state:

(a) whether many companies are selling mineral water in the Indian market;

(b) if so, their names;

(c) which springs do these companies tap;

(d) whether Government have any check on the authenticity of their claims;

(e) whether Government require all such bottles to print on their label the name of the spring from which they draw this water; and

(f) whether the Bureau of Indian Standards would be involved in this exercise?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY): (a) Yes. Sir.

(b) The names of some of the brands of mineral water available in the market are given in the Statement (*See* below).

(c) to (e) As natural mineral water is obtained from potable natural or drilled sources like spring, artesian well, drilled well or from an underground formation, the name of the spring is not required to be declared by the manufacturers.

(f) The Bureau of Indian Standards has already formulated specifications for mineral water.

Statement

Names of the some of the brands of Mineral Water available in the market

1. Adna Mineral
2. Amrit Aqua
3. Amarjal
4. Amust
5. Aqua Fresh
6. Aqua Plus
7. Bisleri
8. Caps
9. Cherio
10. Deep Spring
11. Deu Drops
12. Fitt
13. Fizzy
14. Florida
15. Fountain
16. Ganga
17. Gold Star
18. Gold Drop
19. Himalaya Aqua Pura
20. Ice Ozonised Spring Water
21. Kingfisher
22. Mahak Pio Pio
23. Nirmal
24. Nura Aqua Pura
25. Oasis
26. Parle Bailley
27. Penguin
28. Prakash Aqua
29. S.M. Pepy
30. Stream
31. Trupti
32. Voltic
33. Yes
34. Kauvery

Use of Unapproved Contraceptives

980. SHRI K.R. MALKANI: Will the PRIME MINISTER be pleased to state:

(a) whether Government are aware that an untested and unapproved carcinogenic contraceptive like Quinacrine is being used in the lady Hardinge Medical College and other official and non-official medical centres in several parts of the country, as reported in "The Statesman" dated the 9th April, 1997;

(b) whether any action has been taken against the doctors and institutions using Quinacrine; and

(c) whether this dangerous drug is being promoted in India by two American doctors, as reported in the Times of India dated the 16th March, 1997?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY): (a) and (b) The drug Quinacrine was used for the study purpose in 1995-96 as a part of post-graduate thesis by lady Hardinge Medical College with the permission of its local Ethical Committee. The drug is no longer being used at LHMC. The Indian Council of Medical Research (ICMR) had initiated in 1993 a pilot study entitled "Clinical evaluation of Quinacrine Pellets for female sterilisation — a does finding study" at two Human Reproduction Centes of ICMR. A total of 8 women were enrolled and the results of study were reviewed by Toxicology Review Panel of ICMR. The study was discontinued in 1994 due to high failure rate (failure observed in 4 out of 8 women, side effects (high fever) in two women and lack of toxicity date available globally.

(c) LHMC have reported that the drug was obtained from Dr. Elton Kessel through Dr. J.K. Jain, President, IF.F.H.

Medical Reimbursement facility to Retired Government Employees

981. SHRI RAM GOPAL YADAV:
SHRI ISH DUTT YADAV:

Will the PRIME MINISTER be pleased to state:

(a) whether Government's attention has been drawn to the news-item published in 'The Times of India' dated the 28th May, 1997 under the caption "Right to life includs Right to health";

(b) whether the Supreme Court has upheld the claim of reimbursement of